



## North Carolina Department of Health and Human Services

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### Division of Mental Health, Developmental Disabilities and Substance Abuse Services

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June 1, 2006

### MEMORANDUM

TO: Legislative Oversight Committee Members  
Commission for MH/DD/SAS  
Consumer/Family Advisory Committee Chairs  
State Consumer Family Advisory Committee Chairs  
Advocacy Organizations and Groups  
North Carolina Association of County Commissioners  
County Managers  
County Board Chairs  
North Carolina Council of Community Programs  
State Facility Directors  
Area Program Directors  
Area Program Board Chairs  
DHHS Division Directors  
Provider Organizations  
MH/DD/SAS Professional Organizations and Groups  
MH/DD/SAS Stakeholder Organizations and Groups  
Other MH/DD/SAS Stakeholders

FROM: Mike Moseley *Mike Moseley*  
Allen Dobson, MD *Allen Dobson, MD*

RE: Communication Bulletin #055  
New Phases for Provider Endorsement; Policy Amendment for Conditional Endorsement

The Division of MH/DD/SAS has published under Communication Bulletins #44 and #47 the policy and procedure regarding the endorsement of providers to enroll in the Medicaid program. This communication gives further guidance regarding Phases of endorsement as well as provides notification of an amendment to the current policy regarding conditional endorsement.

Communication Bulletin #47 stipulated the phases and dates for each service definition. Phase IV was originally scheduled to occur from June 1, 2006-August 31, 2006. Phase IV has been expanded into three different phases to allow sufficient time to make the transition to these services as seamless as possible. Following are the changed phases and dates:



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Phase IV (June 1, 2006-August 31, 2006)

- Detox Services (Ambulatory, Non-hospital Medical, Medically Supervised/ADATC)

Phase V (August 1, 2006-October 31, 2006)

- CAP-MR/DD Waiver Services

Existing CAP-MR/DD providers currently directly enrolled in the Medicaid program will not be required to go through the new endorsement process at this time. Their current enrollment status will remain the same until we have more information about implementation of the NPI (National Provider Identifier) and the new Medicaid Management Information System, NC LEADS, rolls out. Currently enrolled CAP-MR/DD providers will be required to sign the standardized MOA with the LME(s) in whose catchment area(s) the provider offers services, prior to 10/31/06 in order to continue to provide services.

Failure to sign: Currently enrolled CAP-MR/DD providers who fail to sign the MOA may have their enrollment in the Medicaid program terminated.

New CAP-MR/DD providers will be required to go through the full endorsement process. Just like other MH/DD/SA providers, when the provider has completed the endorsement process they will send their application and letter of endorsement from the LME directly to DMA Provider Enrollment.

Phase VI (September 1, 2006-December 31, 2006)

- Child Residential Treatment Services

Child Residential providers licensed as .1300 or .1700: All providers who are not enrolled on June 1, 2006, or those with less than 4 beds that are not currently directly enrolled, or those changing licensure category, or those currently licensed and enrolled but whose enrollment expires before January 1, 2007, will apply for endorsement by the LME.

All other Child Residential Treatment Services providers that are currently enrolled must apply for endorsement at least 90 days prior to the expiration of their license. Currently enrolled Child Residential Treatment Services providers whose license expires after December, 2006 will be required to sign the MOA with the LME(s) in whose catchment area(s) the provider is located, prior to 12/31/06.

**Endorsement Policy Amendment**

Due to the large number of providers that are conditionally endorsed but not yet fully and/or adequately staffed to provide Medicaid Enhanced Benefit Services, the following amendment to the *Policy and Procedures for Endorsement of Providers of Medicaid Reimbursable MH/DD/SA Services* has been agreed upon by the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS) and the Division of Medical Assistance (DMA).

Providers who are conditionally endorsed after June 15, 2006 must be fully staffed (have adequate numbers of qualified staff per the service definition) and be accepting referrals or providing services (site and service specific) to consumers within 60 days of DMA direct enrollment.

Providers who have been or who become conditionally endorsed prior to June 15, 2006 must be fully staffed (have adequate numbers of qualified staff per the service definition) and be accepting referrals or providing services (site and service specific) to consumers within 90 days of DMA direct enrollment.



Failure of conditionally endorsed providers to be fully staffed or failure to accept referrals or provide services within the timeframes noted in this policy amendment will result in withdrawal of endorsement by the LME and disenrollment by DMA.

Questions or comments regarding this correspondence should be referred to Dick Oliver at [Dick.Oliver@ncmail.net](mailto:Dick.Oliver@ncmail.net) or (919) 715-1294.

cc:	Secretary Carmen Hooker Odom	Dr. William Lawrence
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	Dan Stewart	Wayne Williams
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